

<p><i>Effective on 12/08/2004.</i>  <b>FEE TRANSMITTAL</b>  <b>For FY 2009</b></p> <p>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4616).</p>		<p><b>Complete if Known</b></p>	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/531,520-Conf. #9089
		Filing Date	November 16, 2005
		First Named Inventor	Yoshiro OKAMI
		Examiner Name	N. A. Bowers
		Art Unit	1797
TOTAL AMOUNT OF PAYMENT		(\$)	960.00
		Attorney Docket No.	4986-0103PUS1

**METHOD OF PAYMENT** (check all that apply)

☐ Check   
 ☐ Credit Card   
 ☐ Money Order   
 ☐ None   
 ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account   
 Deposit Account Number: 02-2448   
 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below   
 ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   
 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims    Extra Claims    Fee (\$)    Fees Paid (\$)    Multiple Dependent Claims  
 - or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_    Fee (\$)    Fees Paid (\$)  
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims    Extra Claims    Fee (\$)    Fees Paid (\$)  
 - or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_  
 HP = highest number of independent claims paid for, if greater than 3.

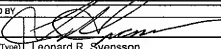
**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 = _____	/50 = _____	(round up to a whole number) x _____	= _____	

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 ...	405.00
2253 Extension for response within third month	555.00

<b>SUBMITTED BY</b>		Registration No.	30,330	Telephone	(858) 792-8855
Signature		(Attorney/Agent)			
Name (Print/Type)	Leonard R. Svensson	Date	November 18, 2010		